

**Stevenson Memorial Hospital
Meeting of Board of Directors**

Thursday, March 7, 2013
Physical Therapy Department
5:00 p.m.

In attendance:

Elected Directors

John Swinden, Board Chair; Scott Anderson; Alan Dresser; Paul Edmonds; Paul Farley; Michael Martin; Jim Poling; David Purvis

Ex Officio Directors

Annette Jones, President & CEO; Shannon Landry, Vice President/Chief Nursing Officer; Glenn Rae, President, SMH Foundation; Dr. Nancy Merrow, Interim Chief of Staff

Regrets:

Darlene Blendick; Debbie Hudson; Marilyn Lawrence; Cathy Morden; Dr. S. Tomini, President of Medical Staff; Diane Munro, President, SMH Auxiliary; Terry Kuula, interim Chief Financial Officer

Guests:

Marg Barber, SMH Foundation; Kathy Stevenson, Manager, Quality, Patient Safety, Risk & DI

1. Call to Order

J. Swinden called the meeting to order.

2. Conflict of Interest

J. Swinden reminded those in attendance of their responsibilities as Board members with respect to the Conflict of Interest as outlined in the Corporation Bylaws and asked if anyone present wished to declare a conflict of interest. No declarations were made.

3. Presentations

• **This Hospital is Yours**

Marg Barber & Paul Edmonds provided a presentation entitled "This Hospital is Yours"; a copy of which is included in the minute book. The presentation provided a general overview of the Hospital and will be presented in the community to local business, service clubs, etc. The Board enthusiastically supported this new communication tool.

• **Canadian Hospital Reporting Project (CHRP)**

Kathy Stevenson provided a presentation on the recently released Canadian Hospital Reporting Project data, a copy of which is included in the minute book. CHRP is a national quality improvement initiative from the Canadian Institute for Health Information (CIHI). K. Stevenson shared the indicators in which Stevenson was flagged above and below the performance of other peer hospitals, Ontario hospitals and CLHIN hospitals. All areas flagged will require further investigation by Stevenson and an update on the actions will be provided to the Board in the future.

4. Minutes of the meeting held on February 7, 2013

Motion: Moved by P. Edmonds, seconded by J. Poling, CARRIED.

“That the Board of Directors approves the minutes of February 7, 2013 as presented.”

5. Goal 1 – Safe, Quality Care

5.1 Patient Experience

There was no patient story for the Board meeting.

5.2 Critical Incident Report

There were no new critical incidents to report.

5.3 Report of Quality Committee

Circulated to the Board were the minutes of March 4, 2013.

- **Enterprise Risk Management Program & Policy**

Further to a recommendation from the Accreditation survey, circulated was a draft Board policy on the Enterprise Risk Management Program along with a spreadsheet outlining the potential risks identified in the organization. These documents are still work in progress and a finalized copy will come forward to the Board in the future for approval.

- **Quality Improvement Plan (QIP)**

Circulated was the draft 2013/14 QIP which is required to be reviewed and approved by the Board annually.

Motion: Moved by A. Dresser, seconded by D. Purvis, CARRIED.

“That the Board of Directors approves the 2013/14 Quality Improvement Plan as circulated.”

Next steps include posting the QIP on the Hospital’s website and forward a copy to Health Quality Ontario (HQP).

- **Ethical Decision Making Framework**

Further to a recommendation from the Accreditation survey, circulated was a draft Ethical Decision Making Framework for the Board. The Framework will be used by the Board when it is required to make an ethical decision related to resource allocation. It was agreed that a mock study at the Board level using the framework would be beneficial and should be undertaken in the fall.

5.4 Report of President of Medical Staff

There was no report as Dr. Tomini was absent from the meeting.

5.5 Report of Chief of Staff

Dr. Merrow referenced her written report circulated with the agenda and highlighted that the Chief of Service/Physician Leader 360 Reviews will be undertaken. Upon completion of the survey by SMH physicians, the results will be correlated for meetings with the Chief of Staff and Chief of Service/Physician Leader to look at performance planning.

6 Goal 2 – Champions of Care

6.1 Report of Human Resources Committee

No meeting since the last Board meeting; next meeting is scheduled for April 11, 2013.

7 Goal 3 – Power in Partnerships

7.1 Report of the Communication Committee

Circulated with the agenda were the minutes of February 13, 2013.

The Hospital's new website is now live; an official launch will be held in the near future.

8. Goal 4 – Finance

8.1 Report of Finance Committee

Circulated with the agenda were the minutes of February 21, 2013.

- **Financial Statements as at January 31, 2013**

The January 31, 2013 financial statement shows a surplus of \$5,460 for the month of January and a year-to-date deficit of \$51,116. A Hospital wide moratorium on overtime and minor equipment purchases has helped to achieve this month's surplus. Management is closely monitoring all overtime and is provided with a report after each pay in which any overtime incurred in their department; this new practice will continue moving forward into the next budget year.

Hospital Management is in the process of obtaining additional quotes to undertake an actuarial review. It was agreed that the review will be completed in 2013/14 and not in the current year due to the cost to undertake the review.

- **2012/13 Hospital Service Accountability Agreement (HSAA) – Amending Agreement**

Circulated with the agenda was the revised 2012/13 H-SAA Amending Agreement which included final allocations and targets that were not included in the previous signed agreement with the Central Local Health Integration Network (LHIN). A change in the Amending Agreement includes the addition of the Pay For Results Funding received by Stevenson in the amount of \$725,600.

Motion: Moved by A. Dresser, seconded by M. Martin, CARRIED.

“That the Board of Directors accepts the recommendation of the Finance Committee and approves the 2012/13 Hospital Service Accountability Amending Agreement – Final Allocations and Targets and authorizes the Board Chair and Chief Executive Officer to sign.”

Scott Anderson abstained from voting on this motion.

- **2013/14 Budget**

The Finance Committee has not had sufficient time to review the material to meet the Central Local Health Integration Network's (LHIN) deadline for the 2013/14 budget. It is expected that the budget will be reviewed at the April Finance meeting. It was

noted that the budget will either be submitted to the Central LHIN in draft format, subject to Board approval, or the Hospital may ask for a further extension. The Board will be apprised of next steps.

- **Quality Based Procedures (QBP)**

A. Jones noted that she recently attended an education session on Quality Based Procedures (QBP) and the Central LHIN advised that they have not set the price point for 2013/14 for these procedures and that the prices may not be set well into the fiscal year. The Board commented that this delay does make it difficult for Hospitals to prepare their budget when not all funding information is available.

9. Goal 5 – Building the Best

9.1 Future Health Care Centre Committee (FHCCC)

There was no meeting since the last Board meeting. The Hospital did submit its Pre Capital Submission (Schedule A) to the Central LHIN in mid-January. The Central LHIN has acknowledged receipt of the Hospital's submission and it is expected that it will be reviewed at their May Board meeting. In the meantime, the Hospital has been preparing the New Emergency Department community awareness campaign which will start in March with some inserts in local media supported by a 800# and e-mail.

10. Other Committees

10.1 Report of Governance & Nominating Committee

Circulated with the agenda were the minutes of February 22, 2013.

- **Appointment of Directors**

P. Farley advised that various candidates were interviewed utilizing methodology agreed to. Per the Bylaws, a slate of candidates for Directors equal to the number of vacancies shall be presented to the Board for approval and for subsequent election by the Voting Members of the Corporation at the Annual Meeting of Members (AGM) scheduled for June 18, 2013.

Motion: Moved by A. Dresser, seconded by P. Edmonds, CARRIED.

“That the Board of Directors accepts the recommendation of the Governance & Nominating Committee and approve (subject to a clear police report re criminal convictions) the following slate of candidates to stand for election as Board Directors: Jan Tweedy for a three (3) year term and Andrew Morris and Cory Jackman each for a one (1) year term;

and furthermore, that these names be brought forward for election by the Voting Members of the Corporation at the Annual General Meeting scheduled for June 18, 2013.”

- **Orientation Binder**

Circulated with the agenda was a revised index and orientation session outline for the newly revised orientation manual. D. Purvis led the review of the manual further to direction by the Executive Committee.

Board orientation will be scheduled shortly after new Directors are appointed – during the summer. Mentors for new Board Directors will be appointed before the orientation session. It was noted that Advisory Members appointed to Board Committees will also receive a copy of the orientation binder and will be included in the summer Board Orientation session.

The Board Chair and CEO will be providing a welcome message to be included in the binder and Committee Chairs will be asked to provide an overview of their respective Committees.

Any new Advisory Members appointed throughout the year will be provided with a copy of the orientation binder and will meet with their respective Committee Chair and will be asked to participate in the first annual orientation session available.

10.2 Report of Executive Committee

There was no meeting since the last Board meeting.

Motion: Moved by P. Edmonds, seconded by D. Purvis, CARRIED.

“That the Board of Directors accepts all reports of the Board Committees as presented.”

11. Reports

11.1 Report of CEO:

A. Jones provided the following update:

- Alternate Level of Care (ALC) – 2012/13 Q3 has dropped to 12.9% which has resulted in an increased turnover of higher acuity patients on the Medical/Surgical Unit.
- Home At Last Program – the Hospital has been working closely and diligently with Community Care Access Centre (CCAC) to find ways to discharge patients back to home with supports in the community.
- Rural Hospital Funding - Stevenson has been advised that it is no longer eligible for rural hospital funding which has resulted in a loss of \$100K of funding as New Tecumseth has surpassed the Ministry’s eligibility of population of 30,000 (New Tecumseth just slightly exceeds this number – 30,304). The Hospital has communicated with MPP Jim Wilson to see if some consideration could be provided to Stevenson due to the significant impact this will have on the Hospital.
- Dr. Merrow and A. Jones are in their final stages of interviewing Southlake and Stevenson physicians in key leadership roles to obtain an understanding of each stakeholders’ perspective of clinical integration. As well, a similar survey will be conducted with the management of both Hospitals.

11.2 Report of the Auxiliary President

There was no report as D. Munro was absent from the meeting.

11.3 Report of Foundation President

G. Rae referenced his written report circulated with the agenda and noted that the Gala tickets will go on sale March 15th.

11.4 Report of the Board Chair

J. Swinden advised that a meeting has been arranged with the new President of Honda and other staff in April. Moving forward, the Board will be very busy in the coming

months with a focus on meeting the Accreditation recommendations to move to Gold rating. Another significant focus will be the clinical integration initiative between Southlake and Stevenson. Other items of focus will be balancing the Hospital's budget at March 31st with limited funding and the on-boarding of new Board members effective the AGM. J. Swinden thanked each Director for their time and dedication to the Hospital.

12. Next Meeting Date

The next Board meeting will be held on Thursday, April 4, 2013.

There being no further business, the meeting terminated at 7:35 p.m.



John Swinden, Board Chair

Recording Secretary: Sharon Knisley